07/17/2009 18:19 5842521400	PADOSTITE LEG DUBT	FWSE 61
DUE AUGUST IS COVERING JULY I THROUGH DECEMBED DUE FEBRUARY IS	30 R 31	yist's Registration Number
		FOR OFFICE USE ONLY Postmark Date; 1/r 1/02
Print in tak of type.		142
 Fill in Registration Number in spaces provided. Complete form and return to the Poard of Ethics, 8401 Unned I Suite 200. Paton Rouge, LA 70809 (225) 922-1400. This form must be delivered or postmarked by the due date. This form may be faxed to (225) 922-1414. The original should on the day of fax transmittal. 	,	1020940
1. Name, Fauce He Lee		—··i
2. Business Address 12615 Stoneway	y Boton Rou	62 LA 70818
Mailing Address	/)!
3. Business Phone		
 Total of all expenditures made January 1 through June (Include expenditures from Schedules A and B) 	e 30: \$	
 Total of all expenditures made July 1 through Decemb (When Applicable) (include expenditures from Schedules A ar 	ber 31: 5	· · · · · · · · · · · · · · · · · · ·
6. Total of all expenditures made during calendar year: (Line 3 added with Line 5 should equal Line 6)	s	· -
7 Did you make an expenditure exceeding \$50 on one occasion for any one legislator:		
From January 1 through June 30?	[1] No [1] :	SA.
If the answer to either question in Number 7 above is YES, please complete Schedule A and attach.		
Fain- 80), Rivideb		
Page 1 of		

LOBBYING EXPENDITURE REPORT

Lobbyist's Registration Number

8. Did you make expenditures exceeding the sum of \$250 for any one legislator:

From January 1 through June 30? From July | through December 31?

If the answer to either question in Number 8 above is YES, please complete Schedule A and attach.

9 Did you expend funds for a reception, social gathering, or other function to which the entire legislature, either house, any standing committee, select committee, statutory committee, committee created by resolution of either house, subcommittee of any committee, recognized caucus, or any delegation thereof were invited during the reporting period?

Yes.

LT No.

If the answer to Number 9 above is YES, please complete Schedule B and attach.

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by the Lohbyist Hisclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted. m. Tourst.

Fpm: 502 Rev 8/99